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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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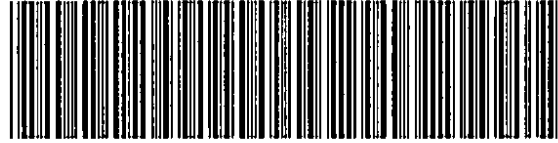
(Business Entity Name)

(Document Number)

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2022 JUN 22 PM 5:52  
SECRETARY OF STATE  
TALLAHASSEE, FL

A. BUTLER

SEP 13 2022

# COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: THE SUPER TRAVEL LLC**

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

RENATA SILVA

\_\_\_\_\_  
Name of Person

PRECISION BUSINESS DEVELOPMENT INC

\_\_\_\_\_  
Firm/Company

240 W PALMETTO PARK RD - STE 310

\_\_\_\_\_  
Address

BOCA RATON, FL 33432

\_\_\_\_\_  
City/State and Zip Code

CONTACT@PRECISIONBUSINESSDEVELOPMENT.NET

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RENATA SILVA

754 252-8664

at ( )

\_\_\_\_\_  
Name of Person

Area Code

Daytime Telephone Number

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED

2022 JUN 22 PM 5: 52

THE SUPER TRAVEL LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

SECRETARY OF STATE  
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 02/15/2022 and assigned  
Florida document number L22000074856.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

PRECISION BUSINESS DEVELOPMENT INC

New Registered Office Address:

6574 N STATE ROAD 7 - STE 297

*Enter Florida street address*

COCONUT CREEK

*City*

Florida 33073

*Zip Code*

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

If Changing Registered Agent, Signature of New Registered Agent



